Under the Paperwork	Reduction Act of 1995, no pe	ersons are required t	U.S. F o respond to a col	Patent and Trader	oved for use through 1 mark Office; U.S. DEP/ tion unless it displays a	0/31/2002	OF COM	MERCE		
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)				Docket Number. 350292000500			SF	RE		
OTP CON	In re Application of Kouji MATSUSH	IIMA, et al.				NTER	P 2 4	SE		
25 18 100 DE	Application Number 09/202,791 For			Filed 12/22/98			2007	4		
THEN & TRADEME	THERAPEUTIC AGENT FOR ACUTE LUNG INJURY RESULTING FROM INTERECT COMPRISING ANTI-IL-8 ANTIBODY AS ACTIVE INGREDIENT							1		
This is a request under the provisions of 37 (Group Art Unit 1651 CFR 1 136(a) to ext	1651 D.			xaminer . Ware in the above identified appli			ication ma		
The requested extension and appropriate no						a appii	C	9/24		
One month (37 CFR 1.17(a)(1))				\$		·			
Two months (37 CFR 1.17(a)(2))					\$					
Three months (37 CFR 1.17(a)(3)) \$890.00										
Four months (37 CFR 1.17(a)(4)) 09/21 01 FC	/2001 GTEFFER :117	A 00000016 (890.00 CH	031952 098	202791 \$		•			
Five months (37 CFR 1.17(a)(5))				\$.		
Applicant claims small entity statureduced by one-half, and the resu		.27. Therefo	ore, the fee	amount sl	nown above is	;				
A check in the amount of the fee i	s enclosed.									
Payment by credit card. Form PT	O-2038 is attache	ed.								
☐ The Commissioner has already be	een authorized to	charge fees	in this appl	lication to a	a Deposit Acc	ount.				
The Commissioner is hereby authoverpayment, to Deposit Account Transmittal form (PTO/SB/17) is a	Number 03-1952.	I have encl	osed a dup	•	•	. Fee				
I am the applicant/inventor										
assignee of record of the entire interest . See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).										
attorney or agent of record.										
attorney or agent unde Registration number if			l.		•					
WARNING: Information on be included on this form.										
13 Susandar 2007		<i>\(\)</i>	/	Signature		,	-			
		Re	nce (Ga	ANT (4)	7, 60 6) d name		-			
NOTE: Signatures of all the inventors or assign forms if more than one signature is requ		ntire interest or	their represen	ntative(s) are	required. Submit	multip	е			
☐ Total ofform	s are submitted.									

Burden Hour Statement. This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the Individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.